



# BRUU

## Automatic Bank Draft Authorization Form

Bull Run Unitarian Universalists  
9350 Main Street  
Manassas VA 22010  
Attn: Treasurer

### Reasons to sign up for Electronic Giving:

- No need to write checks or bring cash
- Peace-of-mind knowing that BRUU is receiving your contribution even if you are unable to attend
- More secure than checks
- All contributions are recorded for you on your bank statement with date of settlement
- IT COSTS YOU NOTHING!

DATE:		
-------	--	--

Type of Authorization Form: <input type="checkbox"/> <b>New Authorization</b> (attach a voided check below) <input type="checkbox"/> <b>Change of banking information</b> (attach a voided check below)	<input type="checkbox"/> Change donation amount <input type="checkbox"/> Change donation date <input type="checkbox"/> Continue my current electronic donation as is, no change <input type="checkbox"/> Discontinue my electronic donation
---	--

Name
Address

City	State	Zip
------	-------	-----

Please debit my donation from my (check one): <input type="checkbox"/> Checking Account <input type="checkbox"/> Savings Account	<b>FOR OFFICE USE</b> or in lieu of a voided check Routing Number: _____ <b>Valid nine-digit Routing # must start with 0, 1, 2, or 3</b> Account Number: _____ <small>           ⑆ 234567890 123 4567890 000            Routing Number      Account Number      Check Number         </small>
--	---

<b>DATE OF FIRST DONATION:</b> (no earlier than two weeks from submission date) ____ / ____ / ____	<b>FREQUENCY OF DONATION:</b> (check only one) <input type="checkbox"/> Semi-monthly on the 5 <sup>th</sup> and 20 <sup>th</sup> <input type="checkbox"/> Monthly on the 5 <sup>th</sup> <input type="checkbox"/> Monthly on the 20 <sup>th</sup>	<b>DESIGNATED AMOUNT</b> <input type="checkbox"/> (per Transaction \$) _____ <input type="checkbox"/> Yearly Pledge \$ _____
--	--	--

<b>AGREEMENT</b> I authorize Bull Run Unitarian Universalists and Truist bank to process debit entries to my account. I understand that this authority will remain in effect until I provide reasonable notification to modify or terminate the authorization.	
Authorized Signature: _____	Date: _____

**For NEW authorizations or CHANGE of bank information Only!**

*Please attach a voided check here.*